

**HOME INDUSTRY**:

## TOWN OF WAKEFIELD PLANNING BOARD

Land Use Department 2 High Street, Sanbornville, NH 03872 Phone: (603)522-6205 Ext. 312 Fax: (603)522-2295

(For Off	fice Use Only)
	By: Lot:
FEES:	
Application Fee:	\$50
Public Notice: \$12	25 per submission
Abutters:	@ \$* each
*per current U.S. I	Postal Service rates
Prof. Review:	
Total received:	check#

## SITE PLAN REVIEW APPLICATION HOME ENTERPRISES

## Levels Two and Three – Home Occupation and Home Industry

**PROFESSIONAL USES AND CUSTOMARY HOME OCCUPATIONS**: A business, profession or trade that is conducted by a resident of the premises, entirely within the residence or an accessory building, and involves an increase in traffic for clients, patients, associates, or employees. Examples include but are not limited to: doctors, dentists, lawyers, home daycare facilities, accountants, and beauticians.

entirely enclosed within structures. A Home Industry involves an increase in traffic for employees and delivery vehicles, and a minimal increase in traffic for clients. A Home Industry may also involve the use or exposure to

A business or trade that is conducted by a resident of the premises, but not necessarily

toxic or waste products that may be harmful to people or the environment. Examples include but are not limited to: craftsmen, wholesale bakery or other wholesale food production, small engine and boat repair. Tax Map: \_\_\_\_\_ Lot(s): \_\_\_\_ Zoning District: \_\_\_\_ Overlay \_\_\_\_ Property Address: Name of Applicant/Agent: \_\_\_\_\_ Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_ Name of Property Owner: Address: Telephone: \_\_\_\_\_\_ E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_ **BUSINESS INFORMATION:** Name of Business: Type of Business: Hours of Operation: Number of Employees: Off street parking available: Yes / No Parking Capacity: \_\_\_\_\_\_ Size of Parking Area: \_\_\_\_\_ sq. feet Sign: Yes / No If yes, explain size and type:

Deliveries: Yes / No If yes, explain type and frequency:	
Solid Waste Disposal: Yes / No If yes, explain:	
Noise Generated: Yes / No If yes, explain:	
Other information:	
Other information.	
	<del>-</del>
The proposed business will be operated within the above paran	neters.
<b>Certification and Agreement:</b> To the best of my knowledge, all informatio and correct. All proposed development will be in conformance with the information and in the approved plan as well as the provisions of Town Ordinances and Figure 1.	rmation contained on the Application,
The owner/agent by filing an application, hereby gives permission for the Co Planning Board designee to enter the property which is the subject of the appnotice for the purpose of inspection as may be appropriate.	
Applicant/Agent Signature:	Date:
Applicant/Agent Signature:	
Owner Signature:	Date:
Owner Signature:	Date:

SIGNATURE PAGE MUST BE ORIGINALLY SIGNED, OR APPLICATION WILL NOT BE PROCESSED.

## **CERTIFIED LIST OF ABUTTERS**

According to RSA 672:3 "Abutter" is defined as "Any person whose property is located in New Hampshire and adjoins or is directly across the street or stream from the land under consideration by the local Land Use Board. For purposes of receiving testimony only, and not for purposes of notification, the term abutter shall include any person who is able to demonstrate that his land will be directly affected by the proposal under consideration. For purposes of receipt of notification by a municipality of a local Land Use Board hearing, in the case of an abutting property being under a condominium or other collective form of ownership, the term abutter means the officers of the collective or association, as defined in RSA 356-B::3, XXIII.

The following information must be completed by the applicant in order to begin the subdivision/site plan review/lot line adjustment application process. Below, list the verified names and mailing addresses of the applicant, authorized agent(s), engineer, architect, land surveyor, soil scientist, consultant, abutter, holders of conservation easements or restrictions on adjacent lands, municipal/regional planning commissions, (if a regional notice is required), associations, and etc., not more than five (5) days prior to submission, per RSA 676:4,I(b). Abutters' names and mailing addresses must be verified against the records kept in the Wakefield Assessor's Office. Attach additional copies of this form if necessary. Include four (4) sets of mailing labels for each person listed below.

Map/Lot	Name of Property Owner	Mailing Address of Property Owner
•	* *	
Name of Perso	n Preparing List	Date Prepared
Preparer's Sign	nature	Date